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	ION REPORT		. This Document contains informat tional Defense of the United Stat- ing of Title 18, Sections 73 and 73 amended. Its transmission or rev- to or receipt by an unauthorized	es, within the mean- M, of the U.S. Code, as elation of its contents person is prohibited
	SECRI		by law. The reproduction of thi	s form is prohibited.
	SECURITY INFO	DEMATION		
COUNTRY	USSR (Leningrad Oblast)		REPORT	
SUBJECT	Medical Procedures and Documents Used in Leningrad		DATE DISTR.	2 September 1953
	•		NO. OF PAGES	20
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	SECURITY INFORMATION	REPORT
		50X1-HUM
COUNTRY	USSR	DATE DISTR 30 JULY 53
SUBJECT :	Redical Procedures and Documents Used in Leningrad	NO. OF PAGES 5
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4	·	
	THIS IS UNEVALUATED INFORMATION	EOVA LIIIM

### PRECEATOY AND BIRTH PROCEDURES

- I reported to the Pregnancy Consultation 50X1-HUM
  Dispensary No. 17 /see Item No. 7 of Enclosure (A)/ to receive medical
  assistance during my pregnancy period. It was necessary to report here,
  not only to arrange for medical care and to assure reception in a maternity
  hospital at time of birth, but also to obtain authority to procure extra
  food rations, particularly milk, sugar and fat. This authority to procure extra rations had to be obtained at the dispensary and was valid
  for only a four-week period. For this reason an expectant mother had to
  return regularly every four weeks to assure a continuing authorization
  for extra rations. (No milk was available at the time, even though an;
  extra ration authorization was issued.)
- 2. The dispensary conducted a physical examination of the expectant mother as described on a pregnancy card issued to every mother reporting to the dispensary /see I tem No. 7 of Enclosure (A)/. The dispensary placed great stress on the examination of blood for venereal disease and the physicians appeared very frightened of the possibility of any mother having an infectious disease. As stated on the pregnancy card, this card was retained by the pregnant mother, and presented to the maternity hospital, midwife or physician at the time when the child was to be delivered.

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- 3. When my baby was about to born, civil transportation was summoned for me. Leningrad maintained an ambulance service (known as Rapid Assistance Service) to render first-aid assistance in emergencies to any section of the city. The ambulance which came to pick me up was attached to the Lenin Rayon section of Leningrad and was therefore obliged to bring me to a Maternity Hospital in that Rayon. I do not recall the exact location of this hospital except that it was near the Baltic Railroad Station. I had no choice in the selection of the hospital at that time. Soviet citizens in Leningrad who were expectant mothers usually summoned an ambulance if one was available, or reported directly to a maternity hospital.
- 4. In order to enter the hospital I had to present my Maternity Clinic Card /see Item No. 7 of Enclosure (A)/, which showed that I was free of venereal disease. Six or seven physicians were on duty at the Lenin Rayon Maternity Hospital on my arrival. In addition, the hospital had one midwife to every two beds in the wards. At the time of birth many of these physicians and midwives gathered around my bed; it is possible that some of them were students. No drugs were given to me for the relief of birth pains, nor did I receive any pain-relieving drugs after the birth, to my knowledge. /See Item No. 7, page 3 of Enclosure (A), which contains the substance of the history of Johann Cristoph's birth./ I was required to remain in the hospital for eight to ten days after the birth, before returning home. This was normal procedure for Soviet civilians. I occupied a bed in a room with eleven other beds. This ward was not pleasant and only superficially clean.
- 5. At this Maternity Hospital I was presented with a certification that I had given birth to a baby see Item No. 1 of Enclosure (A)/. Normally Soviet parents presented this certification to the ZAGS (a municipal office for registration of vital statistics). Upon presentation of the certificate at ZAGS, the parents would receive an official birth certificate, and the facts about the birth would be entered in the city records. We did not present our certification to ZAGS because we feared that our child would be registered as a Soviet citizen, and this registration might prevent us from bringing the child back to our homeland. We therefore did nothing more with the certification issued by the Maternity Hospital. My husband advised his superiors at the Institute in which he worked of the baby's birth, and he was issued food ration cards for the baby without any need for presentation of a birth certificate.
- 6. Soviet physicians recommended that the Soviet mothers breast-feed their babies for as long as two years after birth. I was advised to breast-feed my baby also, but because of my scanty milk production this nursing period lasted only a few months. The baby began to receive fruit juices two months after birth, and later some vegetables.
- 7. The same general procedure was followed for my pregnancy with Beate. However, I reported to the Pregnancy Consultation Clinic No. 17 only about four weeks before Beate's birth and was given a new pregnancy card see Item No. 8/. Furthermore, prior to the birth I had been advised by a Soviet woman interpreter of the existence of a better-than-average maternity hospital known as the Prof. Snegerev Maternity Hospital located near the Moscow Railroad Station see Items Nos. 2 and 8/. I decided to have my child there and just before the baby was born, I went to the hospital in a private taxi. I had advised the hospital authorities by telephone of my plans see Item No. 8 for details of the birth. Although I received no pain-relieving drugs prior to birth, I was given tablets for the relief of pains after

50X1

- 8. The latter maternity hospital was very clean. The wards had ten or twelve beds each. This birth was also attended by many physicians, students and midwives. No visitors were allowed to come in the wards but food packages could be sent in. The food was not bad, but butter and sugar were scarce and these were always most welcome when sent from the outside. The hospital had no cotton for absorption of bleeding from the genital area during the post-natal period. However, this cotton could be purchased in the city drugstores and was sent to the mothers from outside. The hospital routinely searched all packages sent to mothers. I believe this was done to make certain that no harmful food items reached the mothers, and I did not know that anything was confiscated from the packages.
- 9. The German women who became pregnant after 1950 were able to have their babies at a maternity hospital located opposite the apartment houses where the German community was installed in a park-like area called, in Russian, Victory Park. This was said to be quite modern and clean. Blood transfusions were administered there to mothers requiring such therapy after delivery.

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- 5 --

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18. This committee also recommended that I be given sanatorium treatment. Usually, in the case of Soviet citizens who obtained the committee's recommendation, prompt assignment to a sanatorium took place. However, in my case approval of the Institute at which my husband worked was required. This approval was withheld, I believe, because I was a foreigner, and I could not go to a sanatorium. Refusal was also given to a suggestion that I spend a vacation at a Baltic Sea resort.

icl	aure	(A)	•		
· · ·	Item	No.	1	Birth Certificate	50X1-HUM
	Item	No.	2	Birth Certificate	
	Item	No.	3	who died in a Soviet hospital was autopsied.)	
	Item	No.	4	Certificate irom botain infections bisesses	50X1-HUM
**			٠.	Hospital, listing a diagnosis	
•	Item	No.	5	Immunisation record	50X1-HUM
	Item	No.	6	Health Card	====
3171	Item	Ho.	7	Maternity Clinic Card	50X1-HUM
				Maternity Clinic Card	50X1-HUN
		No.	9	Card of Sanatorium-Spa Selection; Record of Consultation at Maximilian Polyclinio, recommending admission to	

s	EOREZ	5074
	Enclosure (A) Sheet 1 of 14	50X1
Item No. 1 - Birth Certificate		,
Maternity Hospital	CERTIFICATION	<u>.                                    </u>
Lenin Rayon	Issued to	50X1-HUM
Leningrad	that	
	she gave birth to a living	
baby of thesex		50X1-HUM
Given for presentation at	AGS for registration	
	Physician on duty (illegible si	gnature)
Tote: 1. The stamp on this slip Health Division,	reads: Lenin Rayon, Maternity Hospital	- 12
2. ZAGS is the Zapis Akto	v Grashdanskogo Sostoyaniya	
tem No. 2 - Birth Certificate		
CERTI	PICATION	
Issued at the Maternity Hospit	al _	50X1-HUM
to Citisen _	that she, in the abovenamed	50X1-HUM
institution, gave birth to a 1	iving baby of the sex.	, 50X1-HUM
		50X1-HUM
	(illegible signature)	
Note: The stamp on this slip re	adas	
Division of Public Hea	1th (illegible) Rayonsoviet for	•

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50X1 Sheet 2 of 14

(SEAL)

rsfsr

DRATH CERTIFICATE

(year, month and date in figures and words) 50X1-HUM Cause of death registered in the civil registry book 50X1-HUM 50X1-HUM Place of death, city, village Leningrad oblast, kray, republic 50X1-HUM Place of registration (name and location of the ZAGS Bureau)

Date of Issue \_ 24 June 1949

In charge of Bureau of Civil Registration

(illegible signature)

- Mote: 1. The stamp on this slip reads: MVD Administration for Leningred Oblast, Bureau for Registration of Civil Affairs Documents, Vyborg Rayon, City of Leningrad.
  - ZAGS is identified in Note to translation of Item No. 1.

			closure (A)	50X1
		Sh	eet 3 of 14	50X1-HUM
m No. 4 - Certificate on				30/1-110101
Infectious Diseases Hospital	imeni S.P. Botk	in		<b></b>
Leningrad -		,	•	
Mirgorodskaya 3-4				
Phone 4-11-98	•			
	TATEMENT		• • • • • • • • • • • • • • • • • • • •	50X1-HUM
Issued to	4	that h	e was under	
in the hospital from	until		and was il	1.
Diagnosis: Scarlet fever, c	hicken pox (rest	illegibl	.e)	• •
Analyses: (illegible)				•
Treatment:				50X1-HUM
The state of the s	The second secon		a.	
Tpon discharge <u>satisfac</u>	* , * <u> </u>		ng to <del>to the</del>	_
•	Chief of Sec	tion (1)	legible sign	sture)
m No. 5 - Immunization Recor	•	•	•	
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Front Side: City of Leningrad Health Div	rision Poly	rolinio No	•	50X1-HUM
Front Side: City of Leningrad Health Div (stamp reads): Children's C	rision Poly	rolinio No	•	50X1-HUM
Front Side: City of Leningrad Health Div (stamp reads): Children's C	rision Poly Consultant No.	olinic Ko	•	50X1-HUM
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	Enclosure (A)	50X
•	Sheet A of 14	 ]

### Item No. 6 - Cesar Bauer's Health Card

#### Outside Covers

 $\mu^{\Gamma}$ 

At top, in ink, is written: 18/XI/52/ BCG, vaccinated with 75

Public Health Register F. No. 26 Approved by Ministry of Health Children's Polyclinic Address 372 Station 1 b MEDICAL BOOK NO. Date of preparation 50X1-HUM Panily Name \_\_ First name \_\_\_ Patronymic Date and place of birth \_ 50X1-HUM 50X1-HUM Detailed address, place of habitation \_\_\_\_ House No. Quarters No. \_\_Kindergarten Bursery 50X1-HUM -(Written in ink: Anthropological data 50X1-HUM Medical data: a. development of the child b. contagious diseases, at what age, scarlet fever, diphtheria, measles, whooping cough, mumps, chicken pox, ( \_)other diseases. Immunizations Type of injection 50X1-HUM 50X1-HUM 50X1-HUM Inside Covers Factual data (housing conditions, nutrition, body hygiene, etc.) Data of Medical examinations (chart shows space for first and second examination and insertion of dates). Size, weight, chest circumference, rest (?); evaluation of physical growth, bones and joints, muscles, vision,

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physician is to be filled in).

Medical data: a. Development of the Child.

hearing, teeth, internal organs, nervous system, speech imperfections, diagnosis, conclusions and treatment, follow-up of treatment. (Name of

, . 50X

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Enclosure (A)
Sheet 5 of 14

i	Sheet 5 of 14	
•	2 mil 1 c 1 min 19 m 1 m	
J.,	em No. 6 (Continued)	
F1	rst page of attached inserts	
:	(This page is almost identical with cover page of No. 6) The Children's	)
•	Polyclinic is listed as No. 17, address Shta 153 in Moscow	50X1-HUM
	rayon. Age when contracting children's diseases can be determined.	
	Immunizations given:	
٠.		
5e	cond page of insert;	
•	(This page is same as inside cover of No. 6, except that "Family	
	diseases" is described as "Healthy", and certain examination results	
	are listed as N (Negative?) of "Realthy". Doctor's name is illegible.)	
ái.		
91	ip attached to third page of insert:	
	a. Front side:	•
•	Leningrad City Health Department Order No. 1	50X1-HUM
	Initial Repeat	50X1-HUM
	Citizen , year of birth residing at	
	place of work will appear for prophylactic examination	50X1-HUM
	of organs of the thorax at fluorographic room, at roentgenroom of	•
	dispensary, of polyclinic No rayon (applicable items must	<b>;</b>
	be underlined).	FOVA LILIA
į.	Required work date and hour of observation, hour	50X1-HUN
į.	Director (illegible signature)	50X1-HUM
1	(Wantalan) and the control of the co	<i>i.</i> ,·
	(Vertical printing): This order does not replace authorization,	
٠.	reverts to installation. Front side is filled in by the installa-	
J.	tion.	
- '	(Stamp reads): Fluorographic Station, Tubdispanser No. 13,	
	Moscow Rayon, imeni I. V. Stalin, house 100, Phone 23974	
	b. Reverse side:	."
	Conclusion of the physician (roentgenologist) of the fluorographic	
	room (rubber stamp) Organs of thorax normal, subject to confirmatory	
	examination at the fluorographic (roentgen) room on(date)	
	Inquire, do not inquire, at administrative office in the Tubdispanser,	
	of the rayon polyclinic, at the oncological dispensary (applicable item	
	must be underlined) 24 (?)/X-52.	
	Signature of doctor, of roentgenologist	15%

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fluorographic room.

(Vertical printing): Filled in by physician of the roentgenroom of the

(illegible)

Item No. 6 (Continued)

Third page of attached inserts

Diagnosis, Disposition.

• .	,	
	SECRET Enclosure	(A) 50X1
	Sheet 6 of	
<u>em No. 6</u> (Co	ntinued)	
rd page of a	ttached inserts	
	Data of Current Medical Observations	
Date, Initia	l or Repeated Appearance, Complaints, Objective Da	ita,
Diagnosis, I	isposition.	•.
	Satisfactory nutrition, bones, muscles, lymphs	tio 50X1-HUM
•	glands - N (Negative?) Lungs	•
	respiration. Sound clear, belly soft, without	illness
	Healthy	
	Genéral Group	
,	(Signature illegibl	•) 50X1-HUN
	no complaints, clinically healthy, fe	t-free Alet.

		N (Negative?) Lungs	,
	respira	tion. Sound clear, belly soft, without	ut illness
	Healthy		
	Genéral	Group	•
•		(Signature illegi	<b>50</b> X1-HUM
. 9 .	,	no complaints, clinically healthy,	
			The first of the second of the
	· _ ·	(Signature 111egi	.D18) .
		(0)	50044 111104
· Wasser 4.b.		(Signature illegi	ble) 50X1-HUM
	page of attached in		
(He		on third page of insert)	507/4 111184
•		ed anti-diphtheria revaccination.	50X1-HUM
•	. Second :		50X1-HUM.
	$\sim$	(Signature)	FOVA LILIM
	Stool a		
		Accomplished, with positive results,	deworming.50X1-HUM
Pifth	and sixth pages of a	tached inserts	
	ading is the same as		. , 4
		A. See	50X1-HUM
	h page of attached in		
דנע	to. Writing is as fo	• • • •	
	Increased bloc	d pressure; heart not enlarged.	50X1-HUM
Eighth	page of attached in	ert, and inside and back covers	•
	to.	•	•
Slip N	o. 1, detached slip	ontained in Item No. 6:	
		uction, Division of Public Education	. Moscow
	on Executive Committe		50X1-HUM
		, City of Leningrad	
	1		
	, ,	Authorization	50X1-HUN
17.8	ued to	that he received instruction in the	finst alone 50X1-HUM
of		1, City of Leningrad,	
,		· · · · · · · · · · · · · · · · · · ·	50X1-HUN
	change of residence.	Authorization issued f	
,,	Andrea or representating	Director 372 School(I	llegible Signature)
		Secretary (Illegib	le Signature)

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	d slip contained in It	tem No. 6:	•	
a. Front side	in a supplied to the supplied			
				•
SSSR, Ministry o	f Health	Enclosure	2, Registration	
3		Form No. 6	3 a "I certify"	
	Deput	ty Minister of	Health SSSR	, in the second
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	50X1-HUM
				14 1
	Immunization Registr	y Card >		
	Against Pox, Diphthe	eria and Scarle	et Fever	į
			**************************************	Į,i
	nstitution administeri		or a programme of the contract	50X1-HUM
24-41	Arrive at given locali		The state of the s	't <sub>It</sub>
birth				50X1-HUM 50X1-HUM
	, Home address	* ***		50X1-HUM
. '	street		Quarters	50X1-HUM 50X1-HUM
**	Change of address		<del></del>	
Nursery No.		<del></del>		· · · · · · · · · · · · · · · · · · ·
	arten No.	Address		14.
	NoClass_			4°.
Lived throughs	DiphtheriaDe	teSca	rlet FeverDate	
Immunized: Date	Dagnosis	Duration_	——————————————————————————————————————	1,0
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A. Weadle Bine	•			٠.
Vaccination	Inoculations age	ruse grbuener.	18	
Date I		r <b>T</b>	T**	50X1-HUM
			L III	50X1-HUM
Name of Vaccine			_ III	<del>ly </del> version of the
Dosage No. Series			_ III	<del>/</del> -
		I	<u> </u>	<del></del>
Amount of Units (A.E.)	I .	[I	III	· ·
Revaccination	••		•*	
Date	ı .	ıı.	]	50X1-HUM
Name of Vaccine			· · ·	
<u> </u>		II 1.0		· · ·
No. No. Series		III	1	50X1-HUM ,
Amount of Units		III		JOXI HOW ,
* * * * * * * * * * * * * * * * * * * *	inst Scarlet Fever of		] comhdinadi. Admhaticdi-	
and scarlet feve		priecerue. (	comprised grbu energe	
•	isted.			
Written in inks	70.46			
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tem No. 6 Continued)		•	
Slip No. 2, detached slip contained in Item	No. 6 (00	ndddinadd)	
b. Reverse side (Continued)	40. 6 (00	n orman's	
	unik termi		
Inoculations against Pox.			
Vaccination, date of inoculation			<del></del>
Result plus ; Revaccination, date of in	* * * * * * * * * * * * * * * * * * * *		50X1-HUM 50X1-HUM
Date of Examination	, Re	sult	
Immunised had dinhiharia doto			50X1-HUN
scarlet fever, date, end of	aicknege		<del>Part and Parties</del>
	A DE NOME AND THE	Transfer for a principle of	- <del>Grander</del>
Signature of physician, responsible age	nt for arr	enging and ad	tinister-
ing incoulations	· · · · · · · · · · · · · · · · · · ·		- ا
tem No. 7 - Maternity Clinic Card	•	. ""	• • •
rat Page Pregnancy Consultation Dispensary for Protect			A.
No.	tron or mo	tners and Inf	50X1-HUM
Do not lose. Take with you when you appear	ror consul	tation and ha	JQ
• • • • • • • • • • • • • • • • • • •			
to the midwife or physician at birth.	٠,	·	50X1-HUM
Pregnancy Card No.	.:		50X1-HUM
Pregnancy Card No.	\$ .a.		50X1-HUM
Pamily name, first name, patronymic	A .		50X1-HUM
Pregnancy Card No.  Pamily name, first name, patronymic Address			50X1-HUM
Pamily name, first name, patronymic Address Age		ages of w	
Pamily name, first name, patronymic  Address  Age years. Which pregnancy  artificial premature at birth		eges of w	nich:
Pamily name, first name, patronymic  Address  Age	· 1• "		<b>110h:</b> 50X1-HU
Pregnancy Card No.  Pamily name, first name, patronymic Address  Age years. Which pregnancy artificial premature at birth Course of previous births N (Normal ?)  Last menstrual period Beginni	1 ng of feta		50X1-HU
Pregnancy Card No.  Pamily name, first name, patronymic Address  Age	ng of feta	l movement	50X1-HU 50X1-HUM 50X1-HUM
Pregnancy Card No.  Pamily name, first name, patronymic  Address  Age	ng of feta	l movement	50X1-HU 50X1-HUM 50X1-HUM
Pamily name, first name, patronymic  Address  Age	ng of feta	l movement	50X1-HU 50X1-HUM 50X1-HUM
Pamily name, first name, patronymic  Address  Age	ng of feta al (?)	l movement	50X1-HU 50X1-HUM 50X1-HUM
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Pregnancy Card No.  Pamily name, first name, patronymic Address  Age	ng of feta al (?)	l movement	50X1-HU 50X1-HUM 50X1-HU
Pamily name, first name, patronymic  Address  Age	ng of feta al (?)	Skeletal (	50X1-HUM 50X1-HUM 50X1-HUM 50X1-HUM

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Enclosure (A)	50X1
Sheet 9 of 14	

Item No. 7 (Continued)
Second pages

Month and date, week of pregnancy, remarks on hospital visits and state of health (asterisk reads: In case of internal examination, imperative to note time and results of same).

Signature of doctor

(Case history is presented in series of difficult-to-read written insertions.)

Third page:

Memory Of	DIL OH ABBIB CARCO INSULUTION	
Name of InstitutionLer	in Birth Assistance Organization	1 mars 1827
Name, first name, patronym		50X1-HUM
Time of birth _	Duration of birth	
	abnormal, what abnormality	
Operational aids and pecul	larities of birth	· :
Post-natal periods normal	, abnormal, what abnormality singl	9
		50X1-HUM
Written on day after	birth.	•.
Condition of fetue at birt	h N	
Special remarks	Physician-midwife (illegible	signature)
Weight of newborn at bir		
at die	scharge 3030.0	
Size at birth		50X1-HUM
Condition of newborn at di	scharge from the Birth Assistance In	stitutions
not ill		
Umbilical knot fell off on	day, (did not fall off)	50X1-HUM
Condition of lactation,	sufficient (not)	. i
Special remarks(ille	gible)	F
• • • • • • • • • • • • • • • • • • • •		

Physician-pediatrician (illegible)

Enclösüre (A)	
morogare (v)	1
Sheet 10 of 19	7

50X1

# Item No. 7, (Continued) Fourth page:

### Instructions for Pregnant Women

- 1. Pass through pregnancy under observation of consultation physician.
- Wear comfortable clothing and shoes a) do not bind abdomen;
  b) at start of second half of pregnancy support abdomen with wide belt or bandage; c) support breasts with special brassiere;
  d) do not wear garters.
- 3. Avoid meat consumption and sharp and salted food. A diet of milk and fruit and occasional meat dishes is suggested.
- 4. Under no circumstances take alcoholic beverages.
- 5. Ensure a regular, daily, bowel movement; use laxatives only on physician's recommendation. Regular urinalyses are necessary after second half of pregnancy.
- 6. Care for teeth and keep mouth clean.
- 7. Especially guard cleanliness of skin. Baths are required at least twice a week.
- 6. After 32nd week wash nipples daily with cool boric acid solution.
- 9. Use Esmark container for daily rinsing of external genitalia with boiled soapy water. In case of white discharge ("whites"), consultation with physician is necessary.
- 10. Persuade husband to refrain from sexual intercourse if possible.

  Sexual intercourse in last months of pregnancy is definitely harmful.
- 11. Avoid hard physical work, expecially in last eight weeks; light work and walks are beneficial.
- 12. It is obligatory that birth take place at a Birth Assistance Institution which should be notified in advance.

٠,	Enclosure (A) Sheet 11 of 14	
	m No. 8 - Maternity Clinic Card	,
ír	st Page:	
	Pregnancy Consultation Dispensary for Protection of Mothers	EOVA LILIM
٠	and Infants No.	50X1-HUM
	Do not lose. Take with you when you appear for consultation	
	and hand to the midwife or physician at birth.	EOVA LILIM
•	Information Exchange Card for Pregnant Women No.	50X1-HUM
	Address Place of work not working	
	Experience and profession D/X Age 26 What pregnancy	50X1-HUM .
	Miscarriages of which artificial at birth 2 Premature	50X1-HUM
	Course of previous births and miscarriages N	EOVA LILIM
	Last menstrual period First fetal movement(illegible)	50X1-HUM
	Pregnant weeks Estimated time of birth	50X1-HUM
	Dismissed with maternity release fromfordays	•
	Size of pelvis: Skeletal (?) 22, horizontal 27, vertical (?) 3	2
	external conjugate 19 , diagonal conjugate	50X1-HUM
	Height Constitution	50X1-HUM
	Position of fetus Part presented head . Fetal hearbeat le	<u>ft</u>
	Condition of health (Lues, gonorrhea, thc)	
	Observations: Veneralogist (illegible)	
•	Internist (illegible)	
	Dentist (illegible)	EOV1 LILIM
	Wasserman Reaction (-) (illegible) Blood group N/5	
	Edema, proteinuria, blood pressure	50X1-HUM
	Special remarks (illegible, same as on Item No. 7)	

## Second page:

Date, duration of pregnancy, weight, blood pressure, urine, observations, remarks on hospital visit and state of health, signature of doctor.

(Case history is presented in series of difficult-to-read written insertions.)

SECRES

SECRET	
Enclosure (A) Sheet 12 of 17	50X1
m No. 8 (Continued)	AM LANG
Remarks of Birth Assistance Institution  Name of Institution Maternity Hospital imeni Prof. Snegerey	50X1-HUM
Address: <u>Vlites (illegible) 9</u> Date of birth <u>25/V-1948</u> Duration of pregnancy	
Peculiarities and complications at birth R N (Normal birth?)  Operative aids	
Condition of fetus at birth	·. · .
Post-natal period without complications, nature of complicati post-natal illnesses nature of illnesses not associated w birth undiagnosed increase in temperature above 36°, single, repeated Eclampsia  Anesthetisation applied, yes, no. What agent effectiveness: Complete, partial, doubtful anesthesia, anesthesia not achieved.  Written on 7th day after birth, signature below Heeds assistance: yes, no	ith
Special remarks	e, ,
Physician-obstetrician (illegible weight of newborn at birth 2900.0 g. Sex: male, female at discharge 2900.0 g.  Length of body at birth 50 om.	<b>•)</b>
Condition of newborn at time of discharge from the Birth Assistance  Institution Healthy  Umbilical knot fell off on day, did not fall off	34,455 84 84
Condition of lactation: <u>sufficient</u> , not	

Physician pediatrician (illegible)

50X1-HUM

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Enclosure (A)	50X
Sheat 13 of 17	J

Ltem No. 8 (Continued)
Fourth page:

Instructions for Pregnant Women

Lidentical with those instructions given under fourth page, Item No. 7; see Sheet 10 of Enclosure (A)7

Item No. 9 - Card of Sanatorium-Spa Selection

(Note: No. 9 represents a referral to a sanatorium. No space was available in any sanatorium at time of referral.)

Effective from

a. Front side

Card of Sanatorium-Spa Selection

Filled in by attending physician before direction to sanatorium-spa selection commission at the first Ex. (examination?). The sanatoriumspa selection commission fills in the card in the appropriate columns and gives directions, via the patient, to the spa and sanatorium.

The attending physician, at the completion of treatment, likewise fills in the card and retains for future handling.

Name, exact address of the medical, professional institution where patient is treated.

(Stamp): Partly illegible of the City of Leningrad Health Division,
Polyclinic No. 1, formerly Maximianovskaya, Leningrad, Mayorova
Pireulok, House No. 9, Telephone: Information 5-23-47
Oblast Rayon City 50X1-HUM

1. Family name
Address of patient

Date of preparing card From what time was patient under 50X1-HUM observation of institution, referring patient to commission 50X1-HUM 50X1-HUM

2. Social Condition and occupation (profession) supported by another person

- 5. Place of work and official position\_\_\_\_\_
- 4. Complaints, length of illness, essential data of anamnesia, previous treatment (including sanatorium-spa) Pains in region of heart, nervous condition. Never received treatment at a spa.
- 5. Objective changes in the affected organs and most important changes in relation to other organs. Correct (illegible). Satisfactory, nutrition. surface mucous membranes and skin normally colored.

  Lungs clear, heart boundaries normal, sounds clear (?) .801 p blood pressure 110/80. Digestive tract no changes. Nerves of brain normal, Tendons (illegible) lively, (illegible) tremor of eyelids. Thyroid gland slightly enlarged without ocular symptoms.

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Enclosure (A)
Sheet 14 of 14
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vation (EKL and others)
ional disturbance nervous
nt <u>Mayoria Khzintari</u>
nervous system, neuralgic ari, Vyborg Primorski,
rve sanatorium/Gagrol.
nter. Length of stay
tion (yes, no)
±
rman (illegible signature)
of the Commission (illegible)
(polyclinic)
(polyclinic)